

**REGISTRATION AND COMPETITIVE CLASSIFICATION**

**OF TELECOMMUNICATION COMPANIES**

All telecommunications companies must register with the Utilities

and Transportation Commission (UTC) prior to beginning operations in the state of Washington. Refer to RCW 80.36, WAC 480-121, 480-80, and 480-120.

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| 1300 South Evergreen Park Drive SW  PO Box 47250  Olympia, WA 98504-7250 | Telephone 360-664-1160 / Fax 360-586-1150  TTY 360-586-8203 or 1-800-416-5289  Website: [www.wutc.wa.gov](http://www.wutc.wa.gov) |

The UTC has a policy of providing equal access to its services. To request this document in alternate formats, please call 360-664-1133.

* Complete the application form.
* Submit these forms via the [Records Center Web portal](http://www.wutc.wa.gov/e-filing) or e-mail to [records@wutc.wa.gov](mailto:records@wutc.wa.gov) as an electronic attachment. UTC encourages electronic submission of filings.
* UTC will issue a registration certificate with an effective date 30 days from the date the completed application is received and approved.

**Include the following:**

X Current Balance Sheet  Latest Annual Report, if any

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| **Competitive Classification** |

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| --- | --- |
| X NO | Applicant is subject to effective competition and requests waiver of regulatory requirements outlined in WAC 480-121-063 (1). |

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| **Telecommunications Company Information** |

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| Company Name: North Olympic Peninsula Data Centeres | | d/b/a: | |
| Company Mailing Address: PO Box 83 | | | |
| City/State/Zip: Port Hadlock, WA 98339  Web Site Address: www.nopdatacenters.com | | | |
| Unified Business Identification Number (UBI): 603 041 747  (If you do not know your UBI number or need to request one contact the Department of Licensing at 360-664-1400)  Questions regarding this application should be directed to: | | | |
| Name: Kimberly Vasenda / Leo J Boyd II | | | |
| Phone Number: 3603854686 | Fax Number: | | E-mail: lboyd@nopdatacenters.com |
| Mailing Address: PO Box 83 | | | |
| City/State/Zip: Port Hadlock, WA 98339 | | | |

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| **Registered Agent** (A Washington Agent is required if the company is located outside Washington State): | | |
| Name: | | |
| Mailing Address: | | |
| City/State/Zip:  Phone Number: | | |
| **Name, address and title of each officer or director (attach additional pages if needed)** | | |
| Name | Address | Title |
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**Regulatory Contact:**

Name: Leo J Boyd II

Mailing Address: PO Box 83, Port Hadlock, WA 98339

Phone Number: 3603854686 Fax Number:

E-mail: lboyd@nopdatacenters.com

**Consumer Questions and/or Complaint Contact:**

Name: Kimberly Vasenda

Title: Financial Manager

Phone Number: 3603854686 Fax Number:

E-mail: kvasenda@nopdatacenters.com

**Emergency Contact:**

Name: Leo J Boyd II

Title: Chief Technical Officer

Phone Number: 3603854686 Fax Number:

E-mail: lboyd@nopdatacenters.com

**Telecommunication services that will be provided (check all that apply):**

X Local Exchange Service (Resale) X Data Services

Calling Cards  Prepaid Calling Cards

Alternate Operator Services  Directory Assistance

Long Distance Interlata  WATS (800/888)

Long Distance Intralata

Other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_